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**Brian Hepburn, M.D.**  
Executive Director  
NASMHPD

December 10, 2018

Marlene H. Dortch, J.D.  
Office of the Secretary  
Federal Communications Commission  
445 12th Street SW  
Room TW-A325  
Washington, DC 20554

**Re: Implementation of the National Suicide Hotline Improvement Act  
Dockets: WC 18-336 & CC 92-105**

<http://apps.fcc.gov/ecfs>

Dear Ms. Dortch:

The National Association of State Mental Health Program Directors (NASMHPD) is the organization representing the state executives responsible for the \$41 billion public mental health service delivery systems serving 7.5 million people annually in 50 states, 4 territories, and the District of Columbia.

NASMHPD writes to urge the Federal Communications Commission (FCC) to vote to designate a unique 3-digit dialing code—other than the existing 2-1-1 Support Information number used by the U.S. and Canada—for the National Suicide Prevention and Mental Health Crisis Hotline System established under the [National Suicide Hotline Improvement Act of 2018, Pub. L. No. 115-233](#).

We are concerned that not creating a separate number for the National Suicide Prevention Lifeline (the Lifeline) could reduce the immediacy of access for veterans and other individuals contemplating suicide at a time when suicides are now numbering more than 47,000 annually, increasing steadily over several decades. The Centers for Disease Control and Prevention (CDC) report that the 47,000 suicides reported in 2017 numbered 2,000 more than the 2016 total and constituted a 50-year peak. Suicides helped to drive a reduction in life expectancy within the U.S. for the third straight year, the first multi-year reduction in life expectancy since the 1960s, according to the CDC.

The recently enacted legislation was intended to improve access to the Lifeline Network of community-based crisis call centers. The Lifeline Network is a uniquely valuable service that connects with millions of callers in crisis annually, with proven effectiveness amidst steadily increasing demand. Launched in 2004, the number of calls to the Lifeline has significantly grown to over 2 million calls answered in 2017, including over 700,000 calls switched over to the national Veterans Crisis Line. This, despite a long 1-800 number (1-800-273-8255) that is not easy to remember, particularly in times of personal crisis. A unique three-digit dialing code will make it easier for people in mental health crisis and their family members to connect with a highly trained crisis call counselor and to access the care that they need.

NASMHPD also asks that the FCC ensure the new 3-digit number has the technology infrastructure to geographically route callers to the closest crisis call center. Currently, the Lifeline network routes callers by area code. In addition, many Lifeline call centers provide follow-up calls, which has been shown to reduce the perceived risk of future suicidal behavior.<sup>1</sup> NASMHPD urges that the new 3-digit numbering service also have the ability to facilitate follow-up calls.

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<sup>1</sup> Gould, M. S., Lake, A. M., Galfalvy, H., Kleinman, M., Munfakh, J. L., Wright, J., & McKeon, R. (2017). Follow-up with callers to the National Suicide Prevention Lifeline: Evaluation of callers' perceptions of care. *Suicide and Life-Threatening Behavior*. <http://doi.org/10.1111/sltb.12339>.

The Lifeline Network is positive proof of the power of behavioral health and suicide crisis intervention. The Lifeline saves lives every day, helping thousands of people each day find a way forward through their darkest moments. Highly-trained crisis call counselors at over 160 call centers across the nation help Americans and their families with the challenges of mental wellness and suicidal crisis. Extensive, independent research has proven the effectiveness of the crisis intervention provided by the highly trained crisis line counselors of the Lifeline affiliates nationwide.

NASMHPD worries that re-routing Lifeline access through 2-1-1, which now helps callers to get access to a wide array of financial, domestic, general health, and disaster-related information, could slow access to the exigent assistance needed by individuals (and particularly veterans) contemplating suicide. In addition, it would not reflect the recognized priority currently accorded by Congress, the health community, and the public to reducing the United States' ever-escalating suicide rate.

For these reasons, NASMHPD urges the FCC to adopt a unique 3-digit code for accessing the National Suicide Prevention Lifeline network, with the technological infrastructure to geographically route callers to the closest crisis call center and the ability to facilitate follow-up calls.

Please feel free to reach out to [me](#) by email or by phone at 443-838-8456 or to NASMHPD's Director of Policy and Communications, [Stuart Yael Gordon](#), at 716-994-4029 with any questions or ways in which we could be helpful in the adoption of this innovation model.

Sincerely,

A handwritten signature in black ink that reads "Brian Hepburn". The signature is written in a cursive, flowing style.

Brian Hepburn, M.D.  
Executive Director  
National Association of State Mental Health Program Directors (NASMHPD)